API NUMBER_ N/A STATE OF KANSAS WELL PLUGGING RECORD STATE CORPORATION COMMISSION K.A.R.-82-3-117 200 Colorado Derby Building LEASE NAME COX B Wichita, Kansas 67202 WELL NUMBER 2 TYPE OR PRINT NOTICE: Fill out completely 660 Ft. from S Section Line and return to Cons. Div. office within 30 days. 4620 Ft. from E Section Line LEASE OPERATOR Pickrell Drilling Co., Inc. SEC. 19 TWP. 29S RGE. 6 (KXXr(W) COUNTY Kingman ADDRESS 110 N. Market, Suite 205, Wichita, KS PHONE# (316) 262-8427 OPERATORS LICENSE NO. __5123 Date Well Completed 4/62Character of Well good Plugging Commenced 7-7-93 (Oil, Gas, D&A, SWD, Input, Water Supply Well) Plugging Completed ____ The plugging proposal was approved on __July 6, 1993 ___ (date) (KCC District Agent's Name). by ___ Moorse Is ACO-1 filed? yes If not, is well log attached? Yes Producing Formation KC Depth to Top Bottom T.D. Show depth and thickness of all water, oil and gas formations. OIL, GAS OR WATER RECORDS CASING RECORD Size Put in Formation Content From To Pulled out 8. 5/8 208 None 4485 2666 5 1/2 Describe in detail the manner in which the well was plugged, indicating where the mud fluid w placed and the method or methods used in introducing it into the hole. If cement or other plu were used, state the character of same and depth placed, from _feet to __feet each se Sanded to 3650 use dump bailer spotted 5sx cement at 3650, pulled 2666 of casing, ran tubing to 1100, spotted 35sx cement, pulled tubing to 200, spotted 35sx cement, pulled tubing to 258, circulated to surface, pulled tubing, filled with cement. (If additional description is necessary, use BACK of this form.) Name of Plugging Contractor Clarke Corporation License No. 5105 Address P.O. Box 187, Medicine Lodge, KS 67104 NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Pickrell Drilling Co. Inc. STATE COMMISSION _____ COUNTY OF Barber STATE OF Kansas JUL 28 1997 (Employee of Operator) or (Operator) Jeff Sletto above-described well, being first duly sworn on oath, says: That I have know the statements, and matters herein contained and the log of the above-described wields. Asset the transfer of the statements of the statements of the statements. the same are true and correct, so help me God. (Signature) **GLENDA MORRISON** (Address) Medicine Lodge, KS 67104 **NOTARY PUBLIC**

My Commission Expires: Aug. 17, 1994

My Appl. Exp. Aug. 17, 1994

My Commission Expires: Aug. 17, 1994

	BAKER SERVICE	E TOOLS – TALLY PAD etion □ Workover	•
Oil Company		Field Basil County Krügman	Lease Cox "B"
Company Man	Date Drilled 4/62	County Kingman	StateKS
	08 Base 85/8" 4/220	15-095-	00813-000)
	215 Estimated T.C	o. C.	
403	7-3719 K.C. Perfs, 0 CIBP 0-4110 Miss Perfs, 447 Cament & float 485 Base 5½" 15.5# J-5	s ω/220 5x	
REMARKS:			RECEIVED STATE CORPORATION COMMISSION JUN 1 1993 CUNSERVATION DIVISION Wichita, Kansas